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CPHA is an affiliate of
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**TESTIMONY OF
CONNECTICUT PUBLIC HEALTH ASSOCIATION
REGARDING H.B. 5210
AN ACT CONCERNING VARIOUS PAY EQUITY AND
FAIRNESS MATTERS
COMMITTEE ON LABOR AND PUBLIC EMPLOYEES
JANUARY 31, 2017**

Senator Gomes, Senator Miner, Representative Porter, and members of the Labor and Public Employees Committee. I am pleased to submit this testimony on behalf of the Connecticut Public Health Association where I serve as Co-Chair of the Advocacy Committee. The Connecticut Public Health Association (CPHA) is pleased to endorse House Bill 5210 which would address various pay equity and fairness matters. CPHA's mission is to represent and unite the diverse expertise of Connecticut's public health professionals, to ameliorate the most pressing public health issues in the state, and to promote health and safe living for the people of Connecticut.

Bridging the pay gap improves the well-being of women and their families, and is a critical component of addressing health equity, a priority area for CPHA and the state as a whole. CPHA has historically supported paid sick leave and paid family medical leave in order to improve health equity in the state. In Connecticut, women are paid 83 cents for every dollar paid to men, and while it varies, that gap persists across all industries [1]. While women made significant progress in the 80s and 90s, progress has slowed in the last decade, and it is projected that at the current rate, pay equity would not be achieved until 2058 [2]. The substantial pay gap is caused by discrimination, occupational segregation, and care-giving responsibilities. The result is substantially higher levels of poverty, a lifetime loss in income, and a retirement income gap among women [3]. Lower pay affects both two-income and single-income families, but has a more substantial impact on single-mother households where 45.8% of children living in poverty [4].



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The gender pay gap has significant implications for women's health: those who earn less than \$15,000 annually are four times more likely to die prematurely than those making \$70,000. Furthermore, decreases in stress due to increasing income can improve the impact of many illnesses, including maternal and child health outcomes, and decreasing income-related stress can decrease prevalence of preterm birth and low birth weight [5].

Pay equity laws like the Lilly Ledbetter Fair Pay Act and Connecticut's law to root out pay secrecy have been significant steps in addressing the pay equity issue. HB 5210 would expand on these efforts by preventing employers from asking for a wage or salary history prior to compensation has been negotiated, therefore protecting from gender discrimination based on previous salaries. Further, the Act would protect employees from an employer attempting to use their salary history against them in a fair pay suit. Significantly, the Act would also protect employees from discrimination in pay due to pregnancy-related or family or medical leave. Both New York and Massachusetts have taken similar steps to protect employees from salary history questions, and CPHA strongly encourages Connecticut to do the same by considering HB 5210.

For additional information on CPHA's position on HB 5210 or other issues related to health equity, public health infrastructure, environmental health, or prevention, please contact Jenna Lupi, jenna.lupi@gmail.com or 203-804-3562.

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5. Gillhuly, Kim and Rachana Kumar. 2011. Health Impact Assessment of Gender Pay Inequity. Wayne County Department of Public Health and Health Impact Partners. <http://www.pewtrusts.org/~media/assets/2011/04/genderpayinequityhiafullreport.pdf?la=en> (Accessed January 30, 2017)